

TFW/8

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Robert R. HUNTER      Docket No.: 375283-00103  
Serial No.: 10/683,928      Group Art Unit: 2857  
Filed: October 10, 2003      Examiner: Charioui, Mohamed  
For: **METHOD AND APPARATUS FOR READING AND CONTROLLING UTILITY CONSUMPTION**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDEMENT TRANSMITTAL**

**I. ENCLOSURES**

Transmitted herewith are the following documents for the above-referenced application:

- ☒ 8 Page Amendment; and
- ☒ Postcard for date-stamped return as confirmation of receipt of these materials.

**II. STATUS**

- ☒ Applicant claims small entity status under 37 CFR 1.27.

**III. EXTENSION OF TIME**

Applicant petitions for an extension of time under 37 CFR 1.136 for the total number of months checked below:

	Extension (months)	Fee for other than small entity	Fee for small entity
<input type="checkbox"/>	one month	\$ 120.00	\$ 60.00
<input type="checkbox"/>	two months	\$ 450.00	\$225.00
<input type="checkbox"/>	three months	\$1,020.00	\$510.00

**Fee \$0.00**

- ☒ Applicant believes that no extension of time is required. However, this conditional petition is hereby made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

**CERTIFICATE OF MAILING (37 CFR 1.8(a))**

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited on May 11, 2005, with the U.S. Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA, 22313-1450.

Date: May 11, 2005

Yvette Yurralde-Owen

#### IV. FEE FOR CLAIMS

The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

(Col. 1)		(Col. 2)		(Col. 3)	SMALL ENTITY	OR	OTHER THAN A SMALL ENTITY	
Claims Remaining After Amendment		Highest No. Previously Paid For		Present Extra	Rate	Addit. Fee	Rate	Addit. Fee
Total *	39	Minus *0*	20	19	x25=	\$475	x50=	\$0
Indep. *	2	Minus *0*	3	0	x100=	\$0	x200=	\$0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+180=	\$0	x360=	\$0
					TOTAL ADDIT. FEE	\$475	OR	TOTAL ADDIT. FEE
								\$0

- ☐ No additional fee for claims required.  
☒ Total additional fee for claims required \$475.00.

#### V. FEE PAYMENT

- ☒ Charge Account No. 50-2778 the sum of \$475.00 for the additional claims fee.

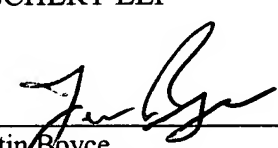
#### VI. FEE DEFICIENCY

- ☒ The Commissioner is authorized to charge any required fees, additional fees, or credit any overpayment to Deposit Account 50-2778.

Respectfully submitted,

DECHERT LLP

Date: May 11, 2005

  
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